		LIQUID SENSO	LIQUID SENSOR FUNCTIONALITY TESTING	ry testing			
Facility Name: SJH Agency Inc			Owner:				
Address: 3311 Carlton rd			Address:				
City, State, Zip Code: Hillsdale, MI 49242	3242		City, Stat	City, State, Zip Code:			
Facility I.D. #:			Phone #:				
Testing Company: United Petroleum Equipment, Inc.	Equipment, Inc.		Phone #:	Phone #: (269) 962-1407		Date: 12/30/24	
This procedure is to determine whether liquid sensors located in the interstitial space of UST systems are able to detect the presence of water and fuel. See PEI/RP1200 Section 8.3 for the test procedure.	liquid sensors locat	ted in the interstitia	al space of UST syst	ems are able to det	ect the presence o	f water and fuel. Se	ee PEI/RP1200
Sensor Location	Unlead STP	Premium STP	Diesel STP	Interstitial	Dispenser 9/10		
Product Stored	Unlead	Premium	Diesel	Unl/Prem/Dsl	Unlead/Prem		
Type of Sensor	☐Discriminating ☑Non-discrimi- nating	☐Discriminating ☑Non-discrimi- nating	☐ Discriminating ☑Non-discrimi-nating	☐Discriminating ☑Non-discrimi- nating	☐ Discriminating ☐ Non-discrimi-nating	☐Discriminating ☐Non-discrimi-nating	☐Discriminating ☐Non-discrimi- nating
Test Liquid	☑Water □Product	✓ Water □ Product	☑Water □Product	✓ Water □ Product	✓ Water □ Product	☐Water ☐Product	□Water □Product
Is the ATG console clear of any active or recurring warnings or alarms regarding the leak sensor? If the sensor is in alarm and functioning, indicate why.	.⊠Yes □No	☑Yes □No	☑Yes □No	☑Yes □No	☑Yes □No	□Yes □No	□Yes □No
Is the sensor alarm circuit operational?	✓Yes □No	✓Yes □No	✓Yes □No	✓Yes □No	√Yes □No	□Yes □No	□Yes □No
Has sensor been inspected and in good operating condition?	√Yes □No	✓Yes □No	✓Yes □No	✓Yes □No	√Yes □No	□Yes □No	□Yes □No
When placed in the test liquid, does the sensor trigger an alarm?	✓Yes □No	✓Yes □No	✓Yes □No	✓Yes □No	√Yes □No	□Yes □No	ON□ SeY□
When an alarm is triggered, is the sensor properly identified on the ATG console?	✓Yes □No	✓Yes □No	√Yes □No	✓Yes □No	✓Yes □No	□Yes □No	□Yes □No
Any "No" answers indicates the sensor fails the test.	fails the test.						
Test Results	✓Pass □Fail	✓Pass □Fail	✓Pass □Fail	✓Pass □Fail	✓Pass □Fail	Pass Pail	Pass Fail
Comments:							
Tester's Name (print) Zac Hemker	ker	Tector's	Tactar's Signatura	Lac Hember	γ,		
lester's Name (print)			10				

		APPENDIX	C-9			
MECH	IANICAL AND PE	ELECTRONIC RFORMANCE		ETECTORS		
Facility Name: SJH Agency Inc			Owner:			
Address: 3311 Carlton rd			Address:			
City, State, Zip Code: Hillsdale, MI 49242			City, State, Zip	Code:		
Facility I.D. #:			Phone #:			
Testing Company: United Petroleum Eq	uipment, Inc.		Phone #: (269) 962-1407	Date: 12/30/	24
This data sheet can be used to test mech turbine pump (STP) systems. See PEI/RP		,	,	line leak detecto	ors (ELLD) with s	ubmersible
Line Number	1	2	3			
Product Stored	Unlead	Premium	Diesel			
Leak Detector Manufacturer	Franklin	Franklin	Red Jacket			
Leak Detector Model	Gas	Gas	Diesel			
Type of Leak Detector	✓MLLD □ELLD	✓ MLLD □ ELLD	✓ MLLD □ ELLD	☐MLLD ☐ELLD	☐MLLD ☐ELLD	☐ MLLD ☐ ELLD
MLLD (ALL PRESSURE MEASUREMEN		IN PSIG)				
STP Full Operating Pressure	28	28	29			
Check Valve Holding Pressure	20	24	25			
Line Resiliency (ml) (line bleed back vol- ume as measured from check valve hold- ing pressure to 0 psig)	220	230	100			
Step Through Time in Seconds (time the MLLD hesitates at metering pressure before going to full operating pressure as measured from 0 psig with no leak induced on the line)	6	8	7			
Metering Pressure (STP pressure when simulated leak rate 3 gph at 10 psig)	12	11	10			
Opening Time in Seconds (the time the MLLD opens to allow full pressure after simulated leak is stopped)	6	7	7			
Does the STP pressure remain at or below the metering pressure for at least 60 seconds when the simulated leak is induced?	✓Yes □No	√ Yes □No	✓Yes □No	□Yes □No	∐Yes ∏No	∏Yes □No
Does the leak detector reset (trip) when the line pressure is bled off to zero psig?	✓Yes □No	✓Yes □No	✓Yes □No	☐Yes ☐No	□Yes □No	Yes No
Does the STP properly cycle on/off under normal fuel system operation conditions?	✓Yes □No	✓Yes □No	✓Yes □No	□Yes □No	□Yes □No	☐Yes ☐No
A "No" answer to either of the above ques	tions indicates the	e MLLD fails the	test.			
ELLD (ALL PRESSURE MEASUREMEN	TS ARE MADE	IN PSIG)				
STP Full Operating Pressure						
How many test cycles are observed before alarm/shutdown occurs?						
Does the simulated leak cause an alarm?	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
A "No" answer to the above question indicates the ELLD fails the test.						
Does the simulated leak cause an STP shutdown?	Yes No	Yes No	Yes No	Yes No	Yes No	Yes No
Test Results	✓ Pass ☐ Fail	✓ Pass ☐ Fail	✓ Pass Fail	Pass Fail	Pass Fail	Pass Fail
Comments:						
Tester's Name (print) Zac Hemker		Te	ster's Signatur	e Zac A	lemker	

		APP	ENDIX C-4			
	C		UMP INTEGRIT			
Facility Name: SJH A	gency Inc		Owner:			
Address: 3311 Ca			Address:			
City, State, Zip Code: Hil		49242	City, State, Zip Co	ode:		
Facility I.D. #:			Phone #:			
Testing Company: United	d Petroleum E	quipment, Inc.	Phone #: 269-	-962-1407	Date: 12/30	/24
This procedure is to test t	he leak integrity o	f containment sun	nps. See PEI/RP12	200 Section 6.5 fo	r the test method.	
Containment Sump ID	Unlead STP	Premium STP	Diesel STP	Disp 1/2	Disp 3/4	Disp 5/6
Containment Sump Material	Fiberglass	Fiberglass	Fiberglass	Plastic	Plastic	Plastic
Liquid and debris removed from sump?*	☑ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	☐Yes ☐No	☐ Yes ☐ No	☐ Yes ☐ No
Visual Inspection (No cracks, loose parts or separation of the containment sump.)	☑ Pass ☐ Fail	□ Pass □ Fail	☐ Pass ☐ Fail	□ Pass □ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail
Containment Sump Depth	43	43	43	29	29	29
Height From Bottom to Top of Highest Penetration	9	11	13	7	7	7
Starting Water Level 18 16			18	12	13	13
Test Start Time	10:00am	10:00am	10:00am	10:00am	10:00am	10:00am
Ending Water Level	18	11	13	12	13	13
Test End Time	11:00am	11:00am	11:00am	11:00am	11:00am	11:00am
Test Period (Minimum test time: 1 hour)	1 Hour	1 Hour	1 Hour	1 Hour	1 Hour	1 Hour
Water Level Change	0	0	0	0	0	0
Pass/fail criteria: Must pa	ass visual inspectio	on. Water level dro	p of less than 1/8	inch.		
Test Results	☑ Pass ☐ Fail	☑ Pass ☐ Fail	☑ Pass ☐ Fail	☑ Pass ☐ Fail	☑ Pass ☐ Fail	☑ Pass ☐ Fail
Comments:						
*All liquids and debris mus	st be disposed of p	properly.				
Tester's Name (print)	ac Hemker		Tester's	Signature <u></u>	ic Hemke	r

Tester's Signature <u>Jac Hemker</u>

		APP	ENDIX C-4			
	C	ONTAINMENT S HYDROSTATI	UMP INTEGRIT			
Facility Name: SJH A	gency Inc		Owner:			
Address: 3311 Ca	rlton rd		Address:			
City, State, Zip Code: Hil		49242	City, State, Zip Co	ode:		
Facility I.D. #:			Phone #:			
Testing Company: United	d Petroleum E	quipment, Inc.	Phone #: 269-	962-1407	Date: 12/30/	/24
This procedure is to test t	he leak integrity o	f containment sum	nps. See PEI/RP12	200 Section 6.5 fo	r the test method.	
Containment Sump ID	Disp 7/8	Disp 9/10				
Containment Sump Material	Plastic	Plastic				
Liquid and debris removed from sump?*	□Yes □No	☐ Yes ☐ No	□Yes □No	□Yes □No	□Yes □No	☐ Yes ☐ No
Visual Inspection (No cracks, loose parts or separation of the containment sump.)	☐ Pass ☐ Fail	□ Pass □ Fail	□ Pass □ Fail	□ Pass □ Fail	□ Pass □ Fail	☐ Pass ☐ Fail
Containment Sump Depth	29	29				
Height From Bottom to Top of Highest Penetration	7	7				
Starting Water Level	15	14				
Test Start Time	10:00am	10:00am				
Ending Water Level	15	14				
Test End Time	11:00am	11:00am				
Test Period (Minimum test time: 1 hour)	1 Hour	1 Hour				
Water Level Change	0	0				
Pass/fail criteria: Must pa	ıss visual inspectio	on. Water level dro	p of less than 1/8	inch.		
Test Results	☑ Pass ☐ Fail	☑ Pass ☐ Fail	□ Pass □ Fail	□ Pass □ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail
Comments: *All liquids and debris mus	st be disposed of p	properly,				

Tester's Name (print) Zac Hemker





		ICKET INTEGRIT GLE- AND DOUBI				
Facility Name: SJH	Agency Inc		Owner:			
Address: 3311 Ca	rlton rd		Address:			
City, State, Zip Code	∺ Hillsdale, MI 49	9242	City, State, Zip Co	de:		
Facility I.D. #:			Phone #:			
Testing Company: L			Phone #: 269-962		Date: 12/30/24	
This procedure is to method, Section 6.3	_			,		· ·
Tank Number	1	2	3			
Product Stored	Unlead	Premium	Diesel			
Spill Bucket Capacity		5 Gallons	5 Gallons			
Manufacturer		OPW	OPW			
Construction	☐ Single-walled☐ Double-walled	☑ Single-walled □ Double-walled	☑ Single-walled ☐ Double-walled	☐ Single-walled☐ Double-walled	☐ Single-walled ☐ Double-walled	☐ Single-walled ☐ Double-walled
Test Type	☐ Hydrostatic ☐ Vacuum ☐ Single-walled ☐ Double-walled	☑ Hydrostatic☐ Vacuum☐ Single-walled☐ Double-walled	□ Hydrostatic □ Vacuum □ Single-walled □ Double-walled	☐ Hydrostatic ☐ Vacuum ☐ Single-walled ☐ Double-walled	☐ Hydrostatic ☐ Vacuum ☐ Single-walled ☐ Double-walled	☐ Hydrostatic ☐ Vacuum ☐ Single-walled ☐ Double-walled
Spill Bucket Type	☑ Product☑ Vapor	☑ Product □ Vapor	☑ Product □ Vapor	☐ Product ☐ Vapor	☐ Product ☐ Vapor	☐ Product ☐ Vapor
Liquid and debris removed from spill bucket?*	□Yes □No	☑ Yes □ No	☑ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	☐Yes ☐No
Visual Inspection (No cracks, loose parts or separa- tion of the bucket from the fill pipe.)	□ Pass ☑ Fail	☑ Pass □ Fail	☑ Pass ☐ Fail	□ Pass □ Fail	□ Pass □ Fail	□ Pass □ Fail
Tank riser cap included in test?	□ Yes □ No □ NA	☑ Yes ☐ No ☐ NA	☑ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA
Drain valve included in test?	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA	☐ Yes ☐ No ☐ NA
Starting Level		11	12			
Test Start Time		9:00am	9:00am			
Ending Level		11	12			
Test End Time		10:00am	10:00am			
Test Period		1 Hour	1 Hour			
Level Change		0	0			
Pass/fail criteria: M Maintain at least 20						valled only:
Test Results	☐ Pass ☑ Fail	☑ Pass ☐ Fail	☑ Pass ☐ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail	🗖 Pass 🗖 Fail
Comments:						
The Unlead S	pill Bucket is o	completely des	stroyed and w	ill need to be	replaced.	
*All liquids and debr	is must be dispose				a // /	•

Tester's Name (print) Zac Hemker

Tester's Signature Zac Hemker

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		VERFILL EQUIF SHUTOFF DEVIC				
Facility Name: SJH Agency Inc			Owner:			
Address: 3311 Carlton rd			Address:			
City, State, Zip Code: Hillsdale, MI	49242		City, State, Zip (Code:		
Facility I.D. #:			Phone #:	_		
Testing Company: United Petroleu	m Equipment, Ir	nc.	Phone #: (269)	962-1407	Date: 12/30/2	24
This data sheet is for inspecting au	tomatic shutoff d	evices and ball flo	oat valves. See PE	I/RP1200 Section	n 7 for inspection	procedures.
Product Grade	Unlead	Premium	Diesel			
Tank Number	1	2	3			
Tank Volume, gallons	13814	5920	4960			
Tank Diameter, inches	126	126	126			
Overfill Prevention Device Brand	Franklin	Franklin	Franklin			
Туре	Automatic	✓ Automatic	✓ Automatic	Automatic	Automatic	Automatic
	Shutoff Device Ball Float	Shutoff Device Ball Float	Shutoff Device Ball Float	Shutoff Device Ball Float	Shutoff Device Ball Float	Shutoff Device Ball Float
	Valve	Valve	Valve	Valve	Valve	Valve
AUTOMATIC SHUTOFF DEVICE IF	NSPECTION					
1.Drop tube removed from tank?	✓Yes ☐ No	☐Yes ✓ No	✓Yes ☐ No	☐Yes ☐ No	☐Yes ☐ No	☐Yes ☐ No
2.Drop tube and float mechanisms free of debris?	✓Yes □ No	□Yes □ No	✓Yes □ No	□Yes □ No	□Yes □ No	□Yes □ No
3.Float moves freely without binding and poppet moves into flow path?	✓Yes □ No	☐Yes ☐ No	✓Yes ☐ No	☐Yes ☐ No	□Yes □ No	∐Yes □ No
4.Bypass valve in the drop tube open and free of blockage (if present)?	☐Yes ☐ No ☐ Not Present	☐Yes ☐ No ☐ Not Present	☐Yes ☐ No ☐ Not Present	☐Yes ☐ No ☐Not Present	☐Yes ☐ No ☐Not Present	☐Yes ☐ No ☐Not Present
5.Flapper adjusted to shut off flow at 95% capacity?*	✓Yes □ No	□Yes □ No	✓Yes □ No	□Yes □ No	□Yes □ No	☐Yes ☐ No
A "No" to any item in Lines 1-5 ind	icates a test fai l u	ıre.				
BALL FLOAT VALVE INSPECTION	* *					
1.Tank top fittings vapor- tight and leak-free?	□Yes □ No	□Yes □ No	Yes No	☐Yes ☐ No	□Yes □ No	□Yes □ No
2.Ball float cage free of debris?	□Yes □ No	Yes No	Yes No	l∐Yes	☐Yes ☐ No	☐Yes ☐ No
3.Ball free of holes and cracks and moves freely in cage?	□Yes □ No	□Yes □ No	□Yes □ No	☐Yes ☐ No	□Yes □ No	☐Yes ☐ No
4. Vent hole in pipe open and near top of tank?	□Yes □ No	□Yes □ No	□Yes □ No	☐Yes ☐ No	□Yes □ No	☐Yes ☐ No
5.Ball float pipe proper length to restrict flow at 90% capacity?***	□Yes □ No	□Yes □ No	□Yes □ No	☐Yes ☐ No	□Yes □ No	☐Yes ☐ No
A "No" to any item in Lines 1-5 ind	icates a test fai l u	ure.				
Test Results	☑Pass ☐ Fail	□Pass 🗸 Fail	✓Pass ☐ Fail	Pass Fail	Pass Fail	□Pass □ Fail
Comments: I was unable to	remove the	premium dro	op tube from	the tank.		
* Use manufacturer's suggested ** If a hall float is found to fail the					low at 95% capa	city.

Tester's Name (print) Zac Hemker

^{***} Use manufacturer's suggested procedure for determining if flow restriction device will restrict flow at 90% capacity.

	APPENDIX	C-7		
	AUTOMATIC TANI OPERATION INSF			
Facility Name: SJH Agency Inc		Owner:		
Address: 3311 Carlton rd		Address:		
City, State, Zip Code: Hillsdale, MI 492	42	City, State, Zip Coc	le:	
Facility I.D. #:		Phone #:		
Testing Company: United Petroleum Eq	uipment, Inc.	Phone #: (269) 9	962-1407 Date: 1	2/30/24
This procedure is to determine whether the automa inspection procedure. This procedure is applicable				
Tank Number	1	2	3	
Product Stored	Unlead	Premum	Diesel	
ATG Brand and Model	TLS-350	TLS-350	TLS-350	
1. Tank Volume, gallons	13814	5920	4960	
2. Tank Diameter, inches	126	126	126	
3. After removing the ATG from the tank, it has been inspected and any damaged or missing parts replaced?	✓Yes □No	☑Yes ☐No	✓ Yes □ No	∏Yes ∏No
4. Float moves freely on the stem without binding?	✓Yes □No	☑Yes ☐No	☑Yes □No	☐Yes ☐No
5. Fuel float level agrees with the value programmed into the console?	✓ Yes □ No	✓Yes □No	✓Yes No	□Yes □No
6. Water float level agrees with the value programmed into the console?	✓Yes □No	✓Yes □No	✓Yes No	□Yes □No
7. Inch level from bottom of stem when 90% alarm is triggered.	106	106	106	
8. Inch level at which the overfill alarm activates corresponds with value programmed in the gauge?	✓Yes □No	✓Yes □No	☑Yes ☐No	∐Yes ∐No
9. Inch level from the bottom when the water float first triggers an alarm.	2	2	2	
10. Inch level at which the water float alarm activates corresponds with value programmed in the gauge?	✓Yes □No	✓Yes □No	✓ Yes No	∏Yes ∏No
If any answers in Lines 3, 4, 5, or 6 are "No," the sy	ystem has failed the	test.		
Test Results	✓ Pass Fail	✓ Pass ☐ Fail	✓ Pass Fail	Pass Fail
Comments:	ATG Battery Tes	t Results? Pass	☑ Fail ∐	
Tester's Name (print) Zac Hemker	Te	ester's Signature _	Zac Hemi	ker

	l	EMERGENCY S OPERATION I				
Facility Name: SJH Agency Inc			Owner:			
Address: 3311 Carlton rd			Address:			
City, State, Zip Code: Hillsdale, M	l 49242		City, State, Zip (Code:		
Facility I.D. #:			Phone #:			
Testing Company:			Phone #: (269)	962-1407	Date: 12/30/24	
This procedure is to verify the ope pensers, submersible turbine pur rately. See PEI/RP1200 Section 1	nps (STPs) and all	non-intrinsically s				I
E-stop Number or ID	1					
Location	Under Counter					
1. E-stops labeled and located where easily accessible?	✓Yes □No	□Yes □No	□Yes □No	□Yes □No	☐Yes ☐No	□Yes □No
2. System fully powered and in normal operating condition?	✓Yes □No	□Yes □No	□Yes □No	□Yes □No	□Yes □No	□Yes □No
3. After activating E-stop, power	disconnected fro	m:				
3a. All dispensing devices on all islands?	✓Yes □No	☐Yes ☐No	□Yes □No	□Yes □No	□Yes □No	□Yes □No
3b. All STPs for all fuel grades?	✓Yes □No	☐Yes ☐No	□Yes □No	☐Yes ☐No	□Yes □No	□Yes □No
3c. All power, control and signal circuits associated with the dispensing devices and the STPs?	✓Yes □No	□Yes □No	∐Yes ∐No	□Yes □No	□Yes □No	☐Yes ☐No
3d. All other non-intrin- sically safe electrical equipment in classified areas surrounding fuel dispensing devices?	✓Yes No	∐Yes ∏No	∐Yes ∏No	□Yes □No	∐Yes ∐No	☐Yes ☐No
4. All intrinsically safe electrical equipment remains energized after E-stop activation?	✓Yes □No	□Yes □No	∐Yes ∏No	☐Yes ☐No	□Yes □No	□Yes □No
5. After testing, E-stop has been reset and power reestablished to normal operating condition?	✓Yes □No	□Yes □No	□Yes □No	□Yes □No	□Yes □No	□Yes □No
A "No" to lines 3a-3d indicates a	test failure.					
Test Results	✓ Pass ☐ Fail	Pass Fail	☐Pass ☐Fail	☐Pass ☐Fail	Pass Fail	Pass Fail
Comments:	mker			725	Mars ha	
ester's Name (print) Zac He	HIVEI		_ Tester's Signa	ature <u>Zac</u>	y i writeer	



EZY CHEK SYSTEMS PRODUCT LINE TESTER DATA SHEET

Test Location Information

Name	SJH Agency Inc
Address	3311 W Carleton Rd
City	Hillsdale MI 49242
Phone	
Contact	

#1	Product	Type:		Diesel	
TIME	DATA	-/+	GPL	RES	GPH
9:15a	57	0	0.0037	0.0000	0.0000
9:30a	57	0	0.0037	0.0000	0.0000
9:45a	57	0	0.0037	0.0000	0.0000
		0	0.0037	0.0000	0.0000
		0	0.0037	0.0000	0.0000
		0	0.0037	0.0000	0.0000
	FINAL RES	ULT:	Pass		

#3	Product	Type:		Unlead	
TIME	DATA	-/+	GPL	RES	GPH
10:30a	67	0	0.0037	0.0000	0.0000
10:45a	66	-1	0.0037	-0.0037	-0.0148
11:00a	65	-1	0.0037	-0.0037	-0.0148
		0	0.0037	0.0000	0.0000
		0	0.0037	0.0000	0.0000
		0	0.0037	0.0000	0.0000
	FINAL RES	SULT:	Pass		

#5	Produc	t Type:			
TIME	DATA	-/+	GPL	RES	GPH
		0	0.0037	0.0000	0.0000
		0	0.0037	0.0000	0.0000
		0	0.0037	0.0000	0.0000
		0	0.0037	0.0000	0.0000
		0	0.0037	0.0000	0.0000
		0	0.0037	0.0000	0.0000
	FINAL RE	SULT:			

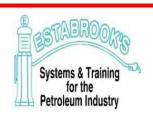
TEST [ATE	12/30 <u>/</u> 24				
Testing C	nformation					
Name	Unite	ed Petroleum Equipment Inc				
Address		300 Custer Dr				
City	,	Battle Creek				
Phone		800-964-8734				
Technica	Technican Information					
Name		Zac Hemker				
Cert #		96-7531				

Applied Pressure	50 psi
Applica i locoulo	00 poi

#2	Product T	ype:	Premium				
TIME	DATA	-/+	GPL	RES	GPH		
9:55a	61	0	0.0037	0.0000	0.0000		
10:10a	60		0.0037	-0.0037	-0.0148		
10:25a	60	0	0.0037	0.0000	0.0000		
		0	0.0037	0.0000	0.0000		
		0	0.0037	0.0000	0.0000		
		0	0.0037	0.0000	0.0000		
	FINAL RES	ULT:	Pass				

#4	Product T	ype:			
TIME	DATA	-/+	GPL	RES	GPH
		0	0.0037	0.0000	0.0000
		0	0.0037	0.0000	0.0000
		0	0.0037	0.0000	0.0000
		0	0.0037	0.0000	0.0000
		0	0.0037	0.0000	0.0000
		0	0.0037	0.0000	0.0000
	FINAL RES	OULT:			

#6	Product 1	Гуре:			
TIME	DATA	-/+	GPL	RES	GPH
		0	0.0037	0.0000	0.0000
		0	0.0037	0.0000	0.0000
		0	0.0037	0.0000	0.0000
		0	0.0037	0.0000	0.0000
		0	0.0037	0.0000	0.0000
		0	0.0037	0.0000	0.0000
	FINAL RES	SULT:			



EZY CHEK SYSTEMS PRODUCT LINE TEST

FINAL REPORT

Test Location Information

Name	SJH Agency Inc
Address	3311 W Carleton Rd
City	Hillsdale MI 49242
Phone	0
Contact	0

TEST DATE

12/30/24

Testing Company Information

	. ,
Name	United Petroleum Equipment Inc
Address	300 Custer Dr
City	Battle Creek
Phone	800-964-8734

Technican Information

Name		Zac Hemker
Cert #		96-7531
Applied F	Pressure	50 psi

PRODUCT LINE TEST

FINAL REPORT

	Product Type	Result
#1	Diesel	Pass
#2	Premium	Pass
#3	Unlead	Pass
#4	0	0
# 5	0	0
#6	0	0

Comments/Recommendations.		



		ភ	SHEAR VALVE OPERATION INSPECTION	PERATION IN	SPECTION				
Facility Name: SJH Agency Inc	y Inc				Owner				
Address: 3311 Carlton rd	rd				Address				
City, State, Zip Code: Hillsdale, MI 49242	e, MI 492	42			City, State, Zip Code:	Sode:			
Facility I.D. #:					Phone #:				
Testing Company: United Petroleum Equipment, Inc.	troleum Ea	quipment,	lnc.		Phone #: 269-962-1407	-962-140			
This data sheet is for inspecting shear valves located inside dispensers. See PEI/RP1200 Section 10 for the inspection procedure.	hear valves loca	ited inside dispe	ensers. See PEI/	RP1200 Section	n 10 for the ins	pection procedu	re.	Date 12/30/24	
Product Grade	Unlead	Premium	Diesel	Unlead	Premium	Unlead	Premium	Unlead	Premium
Dispenser ID#	1/2	1/2	3/4	9/9	2/6	7/8	8/2	9/10	9/10
Shear ValveType (Product/Vapor)	Product	Product	Product	Product	Product	Product	Product	Product	Product
 Is the shear valve rigidly anchored to the dispenser box frame or dispenser island? 	☑Yes □No	☑Yes □No	☑Yes □No	☑Yes □No	☑Yes □No	☑Yes □No	☑Yes □No	☑Yes □No	☑Yes □No
2. Is the shear section positioned between ½ inch above or below the top surface of the dispenser island?	☑Yes □No	☑Yes □No	☑Yes □No	☑Yes □No	☑Yes □No	☑Yes □No	☑Yes □No	☑Yes □No	☑Yes □No
3. Is the lever arm free to move?	☑Yes □No □NA	☑ Yes ☐ No ☐ NA	☑Yes □No □NA	☑Yes □No □NA	☑Yes □No □NA	☑Yes □No □NA	☑Yes □No □NA	☑Yes □No ☑Yes □No ☑Yes □No □NA □NA □NA	✓Yes □No □NA
4. Does the lever arm snap shut the poppet valve?	☑Yes □No □NA	☑ Yes ☐ No ☐ NA	☑Yes □No □NA	☑Yes □No □NA	☑Yes □No □NA	☑Yes □No □NA	☑Yes □No □NA	☑Yes □No □NA	✓Yes □No □NA
5. Can any product be dispensed when the product shear valve is closed?	☐Yes ☑No □NA	☐Yes ☑No ☐NA	□Yes ☑No □NA	□Yes ☑No □NA	□Yes ☑No □NA	□Yes ☑No □NA	□Yes ☑No □NA	□Yes ☑No □NA	□Yes ☑No □NA
A "No" to Lines 1-4 or a "Yes" for Line 5 indicates a test	Line 5 indicates	a test failure.							
Test Results	☑ Pass □ Fail	☑ Pass □ Fail	☑ Pass □ Fail	☑ Pass □ Fail	☑Pass □Fail	☑ Pass □ Fail	☑ Pass □ Fail	☑Pass □Fail	☑ Pass □ Fail
Comments:				4					
Tester's Name (print) Zac Hemker	mker		Tester's S	Tester's Signature	zac Hember	rker			



SPILL BUCKET INTEGRITY TESTING HYDROSTATIC TEST METHOD SINGLE- AND DOUBLE-WALLED VACUUM TEST METHOD Facility Name: AGENCY Owner. CARLETON Address: City, State, Zip Code: 741225 74 City, State, Zip Code: Facility I.D. #: Phone #: Testing Company: United Petroleum Equipment, Inc. Phone #: 269-962-1407 Date: This procedure is to test the leak integrity of single- and double-walled spill buckets. See PEI/RP1200 Section 6.2 for hydrostatic test method, Section 6.3 for single-walled vacuum test method and Section 6.4 for double-walled vacuum test method. Tank Number **Product Stored** Spill Bucket Capacity Manufacturer EB W Single-walled Construction ■ Single-walled ■ Single-walled ☐ Single-walled ☐ Single-walled ☐ Single-walled ■ Double-walled ■ Double-walled ■ Double-walled ■ Double-walled ■ Double-walled ■ Double-walled X Hydrostatic □ Hydrostatic Test Type ■ Hydrostatic ☐ Hydrostatic ■ Hydrostatic ☐ Hydrostatic ☐ Vacuum ■ Vacuum ■ Vacuum ■ Vacuum □ Vacuum □ Vacuum ☐ Single-walled ☐ Single-walled ☐ Single-walled ☐ Single-walled ■ Single-walled ☐ Single-walled ☐ Double-walled ☐ Double-walled ■ Double-walled ☐ Double-walled ■ Double-walled ☐ Double-walled Product ☐ Product Spill Bucket Type ☐ Product ☐ Product ☐ Product ☐ Product ☐ Vapor □ Vapor □ Vapor □ Vapor ■ Vapor ■ Vapor Liquid and debris Yes No removed from ☐ Yes ☐ No spill bucket?* Visual Inspection (No cracks, loose parts or separa-Pass | Fail ☐ Pass ☐ Fail tion of the bucket from the fill pipe.) ☐ Yes ☐ No ☐ Yes ☐ No Yes No Tank riser cap ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No O NA included in test? □ NA □ NA □ NA □ NA □ NA ☐ Yes ☐ No ☐ Yes ☐ No Drain valve ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No MA included in test? □ NA □ NA I NA □ NA □ NA Starting Level **Test Start Time Ending Level** Test End Time 20 Test Period Level Change Pass/fail criteria: Must pass visual inspection. Hydrostatic: Water level drop of less than 1/8 inch; Vacuum single-walled only: Maintain at least 26 inches water column, Vacuum double-walled: maintain at least 12 inches water column. Pass | Fail **Test Results** ☐ Pass ☐ Fail ☐ Pass ☐ Fail ☐ Pass ☐ Fail ☐ Pass ☐ Fail Pass Fail Comments:

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Tester's Name (print) DONNIE GODDENERY Tester's Signature Donnel Godbekete

ill, Overfill, Leak Detection and Secondary Containment Equipment at UST Facilities									
APPENDIX C-5	so que de la								
III FOUIPMENT INSPECTION			CHECK!						

UST OVERFILL EQUIPMENT INSPECTION AUTOMATIC SHUTOFF DEVICE AND BALL FLOAT VALVE									
Facility Name: STH AGENCY			Owner:						
Address. 3311 CARCETON RI			Address:						
City, State, Zip Code: HILC SD ALE, MI			City, State, Zip Code:						
			Phone #:						
Testing Company: UNITED PETRULELLY			Phone #: Date: /- 7- 35						
This data sheet is for inspecting automatic shutoff devices and ball float valves. See PEI/RP1200 Section 7 for inspection procedures.									
Product Grade	PNL								
Tank Number	2		3		y=1/=3/v=0 y/i=				
Tank Volume, gallons	5920								
Tank Diameter, inches	96'1								
Overfill Prevention Device Brand	FRAUK								
Type	Shutomatic Shutoff Device Ball Float Valve	☐ Automatic Shutoff Device ☐ Ball Float Valve							
AUTOMATIC SHUTOFF DEVICE INSPECTION									
1.Drop tube removed from tank?	Yes □ No	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No			
2.Drop tube and float mechanisms free of debris?	Yes □ No	☐ Yes ☐ No	☐ Yes ☐ No	□ Yes □ No	□ Yes □ No	□ Yes □ No			
3.Float moves freely without binding and poppet moves into flow path?	Xes □ No	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	□ Yes □ No	□ Yes □ No			
4.Bypass valve in the drop tube open and free of blockage (if present)?	Yes □ No □ Not Present	☐ Yes ☐ No ☐ Not Present	☐ Yes ☐ No ☐ Not Present	☐ Yes ☐ No ☐ Not Present	☐ Yes ☐ No ☐ Not Present	☐ Yes ☐ No ☐ Not Present			
5.Flapper adjusted to shut off flow at 95% capacity?*	Ves □ No	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No			
A "No" to any item in Lines 1-5 indicates a test failure.									
BALL FLOAT VALVE INSPECTION**									
1.Tank top fittings vapor- tight and leak-free?	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	□ Yes □ No			
2.Ball float cage free of debris?		☐ Yes ☐ No							
3.Ball free of holes and cracks and moves freely in cage?	☐ Yes ☐ No	☐ Yes ☐ No	□ Yes □ No	☐ Yes ☐ No	□ Yes □ No	□ Yes □ No			
4.Vent hole in pipe open and near top of tank?	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	☐ Yes ☐ No	□ Yes □ No	☐ Yes ☐ No			
5.Ball float pipe proper length to restrict flow at 90% capacity?***	☐ Yes ☐ No	□ Yes □ No	☐ Yes ☐ No	□ Yes □ No	□ Yes □ No	□ Yes □ No			
A "No" to any item in Lines 1-5 indicates a test failure.									
Test Results	Pass D Fail	□ Pass □ Fail	□ Pass □ Fail	☐ Pass ☐ Fail	☐ Pass ☐ Fail	□ Pass □ Fail			
Comments:									

Tester's Name (print) DONNE GODBEHER Fester's Signature Donne Godloket

^{*} Use manufacturer's suggested procedure for determining if automatic shutoff device will shut off flow at 95% capacity.

^{**} If a ball float is found to fail the inspection, another method of overfill must be used.

^{***} Use manufacturer's suggested procedure for determining if flow restriction device will restrict flow at 90% capacity.